

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>rm</i>	<i>32</i>	<i>2/16</i>
FORMALITY REVIEW	<i>yn</i>	<i>905</i>	<i>3/17/01</i>
RESPONSE FORMALITY REVIEW	<i>fit</i>	<i>907</i>	<i>5-16-01</i>

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
1	2/25/01
2	2/25/01
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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